

MOTION BY SUPERVISOR DON KNABE

June 26, 2007

Relates to Item 56

The evidence is clear. Despite great effort to improve, the emergency department care at MLK-Harbor is unacceptably poor. The risk to the safety of patients is intolerable. For that reason alone, until and unless someone can come up with a way to immediately fix it, this Board must act expeditiously to discontinue emergency and hospital services there and find safer places for the patients.

However, this must be planned carefully and implemented flawlessly, for we all know how fragile the emergency and hospital care system is, especially in south Los Angeles. To do otherwise is to risk even greater harm to the patients we are seeking to protect. That is why I ask my colleagues to consider postponing the decision to close MLK-Harbor's emergency and hospital services three weeks from now. This will allow the CAO and DHS time to present us with a detailed implementation plan, timetable and impact analysis, all vetted by independent expert health planners. This is what the Board needs to make a sound and wise decision, which truly protects the patients we serve.

This is not to suggest that immediate action be avoided. The elements of the DHS contingency plan that can be done safely should begin immediately. This includes the diversion of 9-1-1 paramedic transport patients away from MLK-Harbor to surrounding emergency rooms whenever it may safely be done.

MOTION

MOLINA	_____
BURKE	_____
KNABE	_____
ANTONOVICH	_____
YAROSLAVSKY	_____

- M O R E -

We should also immediately begin the steps necessary to open additional ICU and Medical-Surgical beds at Rancho and Harbor-UCLA and to start negotiating terms for the purchase of additional services from surrounding hospitals.

What we should not do today is vote to eliminate hospital services at MLK-Harbor. This consideration should occur in three weeks when we will have before us an implementation plan which details the availability of alternate service sites, and an impact analysis which shows whether the community's emergency care and hospital system can safely absorb MLK-Harbor's workload. The contingency plan outline before us lacks these specifics.

I, THEREFORE, MOVE that the Board of Supervisors approve the following:

1. Authorize and instruct the CAO and DHS to immediately activate those parts of the DHS contingency plan outline, which will serve to safely reduce the patient load in MLK-Harbor's emergency department. This includes, but is not limited to, diverting 9-1-1 ambulance transports away from MLK-Harbor in a manner that is determined by the County's Emergency Medical Services Agency to be safe.
2. Request that the CAO, in consultation with DHS, return in three weeks with a detailed implementation plan, timetable and impact analysis to discontinue hospital services at MLK-Harbor Medical Center.
3. Instruct the CAO to immediately identify and contract with independent health planning specialists to review and consult with DHS on the implementation plan, timetable and impact analysis, and to provide the Board and CAO with an expert second opinion on the feasibility and safety of the implementation plan.
4. Instruct the CAO to: a) provide a financial analysis of the implementation plan; and b) a list and assessment of the options available to best re-establish hospital services at MLK-Harbor through privately contacted operations, transfer or sale of the facility.
5. Instruct the Executive Officer of the Board to place on the Board's July 17, 2007 agenda as a set item, consideration of the implementation plan, impact analysis and financial analysis for discontinuing hospital services at MLK-Harbor, the list and assessment of the best options available to reopen those services later through contract operation, transfer or sale.

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